PTC/SSB/06 (09-03)

Approved for tise (prough 7/31/2008, OMB 0651-0002

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Unity the Paperwork Reduction Act of 1995, no persons are sequired to respond to a codection of biformation uniters it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I (Cotmo 1) OTHER THAN (Calumn 2) SMALL ENTITY OR SMALL ENTITY NUMBER FILED BASICIEE D7 CFR 1.15(1)) NUMBER EXTRA RATE ÆF RATE YOTAL CLAIMS D7 OFR L 18(4) OR DOEPEICENT CLAIMS D7 CFR 1.16(b)) OR MULTIPLE DEPENDENT CLASH PRESENT OR P7 CFR 1.15(4) ' If the dillerence in column I is less than zero, enter 'V' in column 2. OR TOTAL **CR** TOTAL CLAIMS AS AMENDED - PART II (Cotumn 1) (Cotumn 2) (Cottons 3) OTHER THAN SMALL ENTITY SMALL ENTITY OR CLAIMS HIGHEST REMADURG MIMBER PRESENT RATE ADOI-TIONAL FEE PREVIOUSLY EXTRA RATE ADDI-TIONAL Lots 11865 FEE Independent FRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.18(d) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Cotumn 3) CAIMS œ HIGHEST REMANING ENDMENT NUMBER PREVIOUSLY PRESENT AFTER RATE EXTRA EHDMENT RATE TIONAL IN CER I'IN'S PAIDFOR TIONAL OR. first presentation of Multiple dependent Class (3) CFR 1.19(4) OR OR TOTAL TOTAL ADD'L FEE ADDL FEF (Catumin 1) (Column 2) CLAMS REMAINING MIGHEST ENT NUMBER PREVIOUSLY PRESENT AFTER RATE ADOL EXTRA RATE AMENOMENT ADD: FEE (I) CHI II RIO PAID FOR FEE OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,14(4)) **GR OR** TOTAL If the entry in column 1 is tess than the entry in column 2, write "If in column 3 is the "Yighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Agnest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Agnest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". TOTAL ADDI FEE OR ADDI FEE

"If the "Adjustal Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

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